

FEC
FORM 3X

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

RECEIVED
2012 FEB -1 AM 11:38
FEC MAIL CENTER

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

D A L L A S S A F A R I C L U B P O L I T I C A L A C T I O N C O M M I T T E E

ADDRESS (number and street)

3 1 0 S . R O S S A V E .

Check if different
than previously
reported. (ACC)

M E X I A T X 7 6 6 6 7 -

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C 0 0 3 5 6 4 7 7

3. IS THIS
REPORT

X

NEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT
(Choose One)

(b) Monthly
Report
Due On:

Feb 20 (M2)

May 20 (M5)

Aug 20 (M8)

Nov 20 (M11)
(Non-Election
Year Only)

Mar 20 (M3)

Jun 20 (M6)

Sep 20 (M9)

Dec 20 (M12)
(Non-Election
Year Only)

Apr 20 (M4)

Jul 20 (M7)

Oct 20 (M10)

Jan 31 (YE)

(a) Quarterly Reports:

April 15
Quarterly Report (Q1)

X July 15
Quarterly Report (Q2)

October 15
Quarterly Report (Q3)

X January 31
Year-End Report (YE)

July 31 Mid-Year
Report (Non-election
Year Only) (MY)

Termination Report
(TER)

(c) 12-Day
PRE-Election
Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

in the
State of

(d) 30-Day
POST-Election
Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

in the
State of

5. Covering Period

0 7 / 0 1 / 2 0 1 1

through

1 2 / 0 3 1 / 2 0 1 1

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer M. LANCE PHILLIPS

Signature of Treasurer

M. Lance Phillips

Date

0 1 / 0 3 1 / 2 0 1 1

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only

FEC FORM 3X
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

DALLAS SAFARI CLUB POLITICAL ACTION COMMITTEE

Report Covering the Period: From: ^M0 ^M7 / ^D0 ^D1 / ^Y2 ^Y0 ^Y1 ^Y1

To: ^M1 ^M2 / ^D3 ^D1 / ^Y2 ^Y0 ^Y1 ^Y1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, ^Y 2 ^Y 0 ^Y 1 ^Y 1		6, 1 3 6 6 7
(b) Cash on Hand at Beginning of Reporting Period.....	, 1 3 1 4 2 9 9	
(c) Total Receipts (from Line 19).....	, 5 1 5 40	, 7 5 2 1 7 2
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	, 1 3 6 5 8 3 9	, 1 3 6 5 8 3 9
7. Total Disbursements (from Line 31).....	, 5 3 6 2 3 0	, 5 3 6 2 3 0
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	, 8 2 9 6 0 9	, 8 2 9 6 0 9
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	, ,	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	, ,	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

12030730060

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

DALLAS SAFARI CLUB POLITICAL ACTION COMMITTEE

Report Covering the Period: From: 0 7 / 0 1 / 2 0 1 1 To: 1 2 / 3 1 / 2 0 1 1

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	, , 0 0 0	, , 0 0 0
(ii) Unitemized	, , 5 1 0 0 0	, , 7 5 1 0 0 0
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	, , 5 1 0 0 0	, , 7 5 1 0 0 0
(b) Political Party Committees	, , -	, , -
(c) Other Political Committees (such as PACs).....	, , -	, , -
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	, , 5 1 0 0 0	, , 7 5 1 0 0 0
12. Transfers From Affiliated/Other Party Committees	, , -	, , -
13. All Loans Received	, , -	, , -
14. Loan Repayments Received	, , -	, , -
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	, , -	, , -
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	, , -	, , -
17. Other Federal Receipts (Dividends, Interest, etc.)	, , 5 4 0	, , 1 1 7 2
18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account (from Schedule H3)	, , -	, , -
(b) Levin Funds (from Schedule H5)	, , -	, , -
(c) Total Transfers (add 18(a) and 18(b))..	, , -	, , -
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	, , 5 1 5 4 0	, , 7 5 2 1 7 2
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	, , 5 1 5 4 0	, , 7 5 2 1 7 2

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	, , .	, , .
(ii) Non-Federal Share.....	, , .	, , .
(b) Other Federal Operating Expenditures	, 2 3 6 2 3 0	, 2 3 6 2 3 0
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	, , .	, , .
22. Transfers to Affiliated/Other Party Committees.....	, , .	, , .
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	, 3 0 0 0 0 0	, 3 0 0 0 0 0
24. Independent Expenditures (use Schedule E)	, , .	, , .
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	, , .	, , .
26. Loan Repayments Made.....	, , .	, , .
27. Loans Made.....	, , .	, , .
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	, , .	, , .
(b) Political Party Committees	, , .	, , .
(c) Other Political Committees (such as PACs).....	, , .	, , .
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	, , .	, , .
29. Other Disbursements	, , .	, , .
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	, , .	, , .
(ii) "Levin" Share.....	, , .	, , .
(b) Federal Election Activity Paid Entirely With Federal Funds	, , .	, , .
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	, , .	, , .
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	, 5 3 6 2 3 0	, 5 3 6 2 3 0
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	, 5 3 6 2 3 0	, 5 3 6 2 3 0

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	, 5 1 0 0 0	, 7 5 1 0 0 0
34. Total Contribution Refunds (from Line 28(d))	, ,	, ,
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	, 5 1 0 0 0	, 7 5 1 0 0 0
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	, 2 3 6 2 3 0	, 2 3 6 2 3 0
37. Offsets to Operating Expenditures (from Line 15, page 3)	, ,	, ,
38. Net Operating Expenditures (subtract Line 37 from Line 36)	, 2 3 6 2 3 0	, 2 3 6 2 3 0

12030730063

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1 OF 1

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

DALLAS SAFARI CLUB POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

, , .

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

, , .

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

, , .

SUBTOTAL of Receipts This Page (optional).....▶

, , 0 0 0

TOTAL This Period (last page this line number only).....▶

, , 0 0 0

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1 OF 2

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)
DALLAS SAFARI CLUB POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Cornyn, John

Date of Disbursement

M M / D D / Y Y Y Y
0 9 / 1 2 / 2 0 1 1

Mailing Address
P. O. Box 13026

City State Zip Code
Austin TX 78711

Purpose of Disbursement
Campaign Contribution

0 1 1

Amount of Each Disbursement this Period

Candidate Name
John Cornyn

Category/
Type

, 1, 0 0 0 . 0 0

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: ☒ Primary ☐ General
☐ Other (specify) ▼
State: TX District:

Full Name (Last, First, Middle Initial)

B. Flores, Bill

Date of Disbursement

M M / D D / Y Y Y Y
0 9 / 1 2 / 2 0 1 1

Mailing Address
P. O. Box 6207

City State Zip Code
Bryan TX 77805

Purpose of Disbursement
Campaign Contribution

0 1 1

Amount of Each Disbursement this Period

Candidate Name
Bill Flores

Category/
Type

, 1, 0 0 0 . 0 0

Office Sought: ☒ House ☐ Senate ☐ President
Disbursement For: ☒ Primary ☐ General
☐ Other (specify) ▼
State: TX District: 17

Full Name (Last, First, Middle Initial)

C. Barr, Andy

Date of Disbursement

M M / D D / Y Y Y Y
0 9 / 2 1 / 2 0 1 1

Mailing Address
P. O. Box 2059

City State Zip Code
Lexington KY 40588

Purpose of Disbursement
Campaign Contribution

0 1 1

Amount of Each Disbursement this Period

Candidate Name
Andy Barr

Category/
Type

, 5 0 0 . 0 0

Office Sought: ☒ House ☐ Senate ☐ President
Disbursement For: ☒ Primary ☐ General
☐ Other (specify) ▼
State: KY District: 6

SUBTOTAL of Disbursements This Page (optional)..... ►

, 2, 5 0 0 . 0 0

TOTAL This Period (last page this line number only)..... ►

, , .

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1 OF 2

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
DALLAS SAFARI CLUB POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Cornyn, John

Date of Disbursement

M M / D D / Y Y Y Y
0 9 / 1 2 / 2 0 1 1

Mailing Address
P. O. Box 13026

City State Zip Code
Austin TX 78711

Purpose of Disbursement
Campaign Contribution

0 1 1

Amount of Each Disbursement this Period

Candidate Name
John Cornyn

Category/
Type

, 1, 0 0 0 . 0 0

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: ☒ Primary ☐ General
☐ Other (specify) ▼
State: TX District:

Full Name (Last, First, Middle Initial)

B. Flores, Bill

Date of Disbursement

M M / D D / Y Y Y Y
0 9 / 1 2 / 2 0 1 1

Mailing Address
P. O. Box 6207

City State Zip Code
Bryan TX 77805

Purpose of Disbursement
Campaign Contribution

0 1 1

Amount of Each Disbursement this Period

Candidate Name
Bill Flores

Category/
Type

, 1, 0 0 0 0 0

Office Sought: ☒ House ☐ Senate ☐ President
Disbursement For: ☒ Primary ☐ General
☐ Other (specify) ▼
State: TX District: 17

Full Name (Last, First, Middle Initial)

C. Barr, Andy

Date of Disbursement

M M / D D / Y Y Y Y
0 9 / 2 1 / 2 0 1 1

Mailing Address
P. O. Box 2059

City State Zip Code
Lexington KY 40588

Purpose of Disbursement
Campaign Contribution

0 1 1

Amount of Each Disbursement this Period

Candidate Name
Andy Barr

Category/
Type

, 5 0 0 . 0 0

Office Sought: ☒ House ☐ Senate ☐ President
Disbursement For: ☒ Primary ☐ General
☐ Other (specify) ▼
State: KY District: 6

SUBTOTAL of Disbursements This Page (optional)..... ►

, 2, 5 0 0 . 0 0

TOTAL This Period (last page this line number only)..... ►

, , .

12030730066

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 2 OF 2

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
DALLAS SAFARI CLUB POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Broun, Paul

Date of Disbursement

Mailing Address
P. O. Box 1512

M M / D D / Y Y Y Y
1 0 / 2 4 / 2 0 1 1

City Athens State GA Zip Code 30603

Purpose of Disbursement
Campaign Contribution

0 1 1

Amount of Each Disbursement this Period

Candidate Name
Dr. Paul Broun

Category/
Type

, , 5 0 0 0 0

Office Sought: ☒ House ☐ Senate ☐ President
Disbursement For: ☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

Mailing Address

M M / D D / Y Y Y Y

City State Zip Code

Purpose of Disbursement

Category/
Type

Amount of Each Disbursement this Period

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

Mailing Address

M M / D D / Y Y Y Y

City State Zip Code

Purpose of Disbursement

Category/
Type

Amount of Each Disbursement this Period

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional).....▶

, , 5 0 0 0 0

TOTAL This Period (last page this line number only).....▶

, , 3 0 0 0 0 0

12030730067

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1 OF 1

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)
DALLAS SAFARI CLUB POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Phillips, Lance

Date of Disbursement

M M / D D / Y Y Y Y
0 7 / 3 1 / 2 0 1 1

Mailing Address

310 S. Ross Avenue

City

Mexia

State

TX

Zip Code

76667

Purpose of Disbursement

Reimbursement for Expenses

0 0 2

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

1 0 9 2 6 0

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☒ Other (specify) ▼

Public Communications

State:

District:

Full Name (Last, First, Middle Initial)

B. Phillips, Lance

Date of Disbursement

M M / D D / Y Y Y Y
0 8 / 2 4 / 2 0 1 1

Mailing Address

310 S. Ross Avenue

City

Mexia

State

Zip Code

Purpose of Disbursement

Reimbursement for Expenses

0 0 2

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

1 2 6 9 7 0

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☒ Other (specify) ▼

Public Communications

State:

District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M M / D D / Y Y Y Y

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional)..... ►

2 3 6 2 3 0

TOTAL This Period (last page this line number only)..... ►

2 3 6 2 3 0

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input checked="" type="checkbox"/> USPS Express Mail	Postmarked 1/31/12
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

Chw

PREPARER
(3/2005)

2/1/12

DATE PREPARED

12030730069